Washington Electronic Product Recycling Program Manufacturer Registration Form

Identification Number (For official use only)

Definitions are provided at the end of this form and can also be found in Chapter 173-900 WAC *Washington Electronic Product Recycling Program*.

Contact Information		
Company Name:	Calendar Year Of Report:	
UBI # TIN #		
Responsible Individual name (see signature section):	
Title:		
Phone: Fax	:	
E-mail:		
Address:		
Street:	City:	
	state: Zip:	
Billing contact name:		
Phone: Fax	::	
E-mail:		
Address:		
Street:	City:	
	State: Zip:	
Recycling Plan Information		
Note: First year question form 1A:		
All manufacturers are required to participate in Ecology to participate in an independent plan.	the standard plan unless they gain approval from	
Note: In order to participate in an independent plan	you must have approval from Ecology and:	
	esent 5% return share of covered electronic products.	
2. The manufacturer(s) cannot be a "new entrant."		
3. The manufacturer(s) can not be a "white bo	x" manufacturer.	
Based on the information you currently have about your company will seek approval from Ecology for	the Electronic Product Recycling Program, do you think an independent plan?	
Yes No, I am planning to participate in the standard plan.		
If yes, will you:		
Submit an independent plan where your con	npany is the only manufacturer?	
Participate with other manufacturers in an in	dependent plan?	
-		
Note: Question for the second and all subsequen	t years of the program:	
Which recycling plan are you participating in?		
Standard Plan Independent plan	name:	

Current Brands:			
on having them sold	all brand names of covered electronic products your comparin Washington. Please include the year you started using that corresponds to the key below.		
	nufacturers must also submit Ecology a picture of the labels an be submitted using a link to a web site displaying the pic		
T=Television	s L=Laptops or portable computers D=Desktop	i	
\Box T \Box L \Box D \Box M	Brand:	Year:	
\Box T \Box L \Box D \Box M	Brand:	Year:	
\Box T \Box L \Box D \Box M	Brand:		
\Box T \Box L \Box D \Box M	Brand:		
\Box T \Box L \Box D \Box M	Brand:	Year:	
$\square \ T \ \square \ L \ \square \ D \ \square \ M$	Brand:	Year:	
$\square \ T \ \square \ L \ \square \ D \ \square \ M$	Brand:	Year:	
$\square \ T \ \square \ L \ \square \ D \ \square \ M$	Brand:	Year:	
\Box T \Box L \Box D \Box M	Brand:	Year:	
Brands no longer	offered for sale:		
	any other brand names that are no longer offered for sale for emark the appropriate box that corresponds to the key above	, , ,	
	nufacturers must also submit to Ecology a picture of the laboran be submitted using a link to a web site displaying the pic		
T=Television	ns L=Laptops or portable computers D=Desktop	os M=Monitors	
\Box T \Box L \Box D \Box M			
\Box T \Box L \Box D \Box M	Brand:		
\Box T \Box L \Box D \Box M	Brand:		
\Box T \Box L \Box D \Box M	Brand:		
	Brand:		
++T+L	Brand:	Year:	

Sales Methods
Please describe the method or methods of sale presently being used in the state (i.e. store front, distributor, internet, etc.):
Signature I certify that to the best of my knowledge, the information contained herein about my company is accurate, true and complete and that my company is aware of our requirements under the Electronic Product Recycling Program (Chapter 173-900 WAC and RCW 70.XXXX).
Signature of responsible individual: The registration form must be signed by the individual responsible for implementing the company's requirements under the WA Electronic Product Recycling Program.
Print Name of responsible individual Signature Date:

Definitions:

- Manufacturer
- Covered electronic product
- Electronic product
- White box
- New entrant
- Standard plan
- Independent plan Return share